

UNITED STATES DISTRICT COURT
FOR THE
EASTERN DISTRICT OF PENNSYLVANIA

UNITED STATES OF AMERICA

Plaintiff

CIVIL NO. 17-05549

vs.

CAROL A. STOUT
DAVID A. STOUT

Defendant(s)

CERTIFICATE OF SERVICE
PURSUANT TO Pa.R.C.P. 3129.2 (c) (2)

Rebecca A. Solarz, Esquire, Attorney for Plaintiff, hereby certifies that service on the Defendants of the Notice of Sheriff Sale was made by:

- ☒ (x) Personal Service by the Sheriff's Office/competent adult (copy of return attached).
- ☐ () Certified mail by Rebecca A. Solarz (original green Postal return receipt attached).
- ☐ () Certified mail by Sheriff's Office.
- ☐ () Ordinary mail by Rebecca A. Solarz, Esquire to Attorney for Defendant(s) of record (proof of mailing attached).
- ☐ () Acknowledgment of Sheriff's Sale by Attorney for Defendant(s) (proof of acknowledgment attached).
- ☐ () Ordinary mail by Sheriff's Office to Attorney for Defendant(s) of record.

IF SERVICE WAS ACCOMPLISHED BY COURT ORDER.

- ☐ () Premises was posted by Sheriff's Office/competent adult (copy of return attached).
- ☐ () Certified Mail & ordinary mail by Sheriff's Office (copy of return attached).
- ☐ () Certified Mail & ordinary mail by Rebecca A. Solarz (original receipt(s) for Certified Mail attached).

Pursuant to the Affidavit under Rule 3129 (copy attached), service on all lienholders (if any) has been made by ordinary mail by Rebecca A. Solarz, Esquire (copies of proofs of mailing attached).

The undersigned understands that the statements herein are subject to the penalties provided by 18 P.S. Section 4904.

Respectfully submitted,

BY: Rebecca A. Solarz, Esq.
Attorney for Plaintiff

UNITED STATES DISTRICT COURT FOR THE EASTERN DISTRICT OF PENNSYLVANIA

THE UNITED STATES OF AMERICA; et seq.
Plaintiff (Petitioner)

v.

CAROL A. STOUT & DAVID A. STOUT; et al.
Defendant (Respondent)

CASE and/or DOCKET No.:

Sheriff's Sale Date: 2/13/19

AFFIDAVIT OF SERVICE

TYPE OF PROCESS: NOTICE OF SALE

I, KENDRA DAY, certify that I am eighteen years of age or older and that I am not a party to the action nor an employee nor relative of a party, and that I served DAVID A. STOUT the above process on the 26 day of November, 2018, at 9:00 o'clock, P.M. at 1014 4th Street Apt. 1 Catasauqua, PA 18053, County of Lehigh, Commonwealth of Pennsylvania.

Manner of Service:

☒ By handing a copy to the Defendant(s)

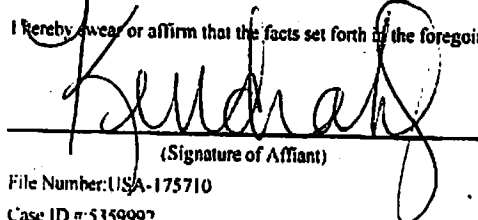
Description: Approximate Age 26-60 Height 6'0" Weight 185 Race WHITE Sex MALE Hair WHITE

Military Status: ☒ No ☐ Yes Branch: _____

Commonwealth State of PA) SS:
County of Berks)

Before me, the undersigned notary public, this day, personally, appeared Kendra Day to me known, who being duly sworn according to law, deposes the following:

I hereby swear or affirm that the facts set forth in the foregoing Affidavit of Service are true and correct.


(Signature of Affiant)

File Number: USA-175710

Case ID #: 5359992

Subscribed and sworn to before me
this 27 day of Nov, 2018.

Notary Public

COMMONWEALTH OF PENNSYLVANIA
NOTARIAL SEAL
Eric M. Afferbach, Notary Public
Washington Twp. Berks County
My commission expires November 18, 2021



UNITED STATES DISTRICT COURT FOR THE EASTERN DISTRICT OF PENNSYLVANIA

THE UNITED STATES OF AMERICA; et seq.
Plaintiff (Petitioner)

CASE and/or DOCKET No.:

Sheriff's Sale Date: 2/13/2019

v.

CAROL A. STOUT & DAVID A. STOUT; et al.
Defendant (Respondent)

AFFIDAVIT OF SERVICE

TYPE OF PROCESS: NOTICE OF SALE

I, DENISE HINKLE, certify that I am eighteen years of age or older and that I am not a party to the action nor an employee nor relative of a party, and that I served CAROL A. STOUT the above process on the 28 day of November, 2018, at 1:06 o'clock, PM, at 5300 HEIDELBERG HEIGHTS ROAD F/K/A 1404 HEIDELBERG HEIGHTS ROAD GERMANSVILLE, PA 18053, County of Lehigh, Commonwealth of Pennsylvania:

Manner of Service:

- ☒ By handing a copy at the residence of the Defendant(s) to an adult member of the family with whom he/she resides or to the adult person in charge of the residence because no adult family member was found *
- ☐ By handing a copy at the residence of the Defendant(s) to the clerk or manager of the hotel, inn, apartment house or other place of lodging at which he/she resides *
- ☐ By handing a copy at the office or usual place of business of the Defendant(s) to the Defendant's(s) agent or to the person for the time being in charge thereof *

* Name: ANDREW STOUT

Relationship/Title/Position: SON

Remarks: _____

Description: Approximate Age 26-30 Height 57 Weight 225 Race WHITE Sex MALE Hair BROWN

Military Status: ☒ No ☐ Yes Branch: _____

Commonwealth/State of Pa.) SS:
County of Berk)

Before me, the undersigned notary public, this day, personally, appeared Denise Hinkle to me known, who being duly sworn according to law, deposes the following:

I hereby swear or affirm that the facts set forth in the foregoing Affidavit of Service are true and correct.

Denise Hinkle
(Signature of Affiant)

File Number: USA-175710

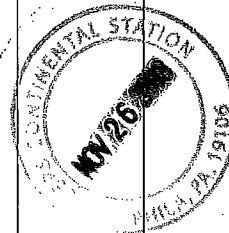
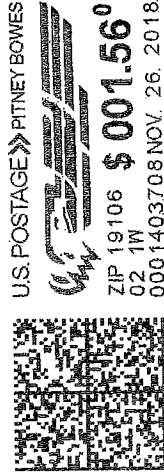
Case ID #: 5359992

Subscribed and sworn to before me
this 29 day of Nov, 2018.

Notary Public

COMMONWEALTH OF PENNSYLVANIA
NOTARIAL SEAL
Eric M. Afflerbach, Notary Public
Washington Twp. Berks County
My commission expires November 18, 2021

Name and Address of Sender KML LAW GROUP, P.C. SUITE 5000 701 MARKET STREET PHILADELPHIA, PA 19106-1532		Check type of mail or service; <input type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Registered <input type="checkbox"/> Delivery Confirmation <input type="checkbox"/> Express Mail <input type="checkbox"/> Insured <input type="checkbox"/> Recorded Delivery (International) <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Signature Confirmation		Affix Stamp Here (If issued as a certificate of mailing, or for additional copies of this bill) Postmark and Date of Receipt		<div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Actual Value if Registered <input type="checkbox"/> Insured Value <input type="checkbox"/> Due Sender if COD <input type="checkbox"/> DC Fee <input type="checkbox"/> SC Fee <input type="checkbox"/> SH Fee <input type="checkbox"/> RD Fee <input type="checkbox"/> RR Fee </div> <div> <input type="checkbox"/> Handling Charge <input type="checkbox"/> Fee <input type="checkbox"/> Postage </div> </div>											
1.	Article Number	Addressee (Name, Street, City, State, & ZIP Code)		DOMESTIC RELATIONS OF LEHIGH COUNTY 14 N 6th Street Allentown, PA 18101		TENANTS / OCCUPANTS 5300 Heidelberg Heights Road Germansville, PA 18053											
2.		PA-DEPARTMENT OF PUBLIC WELFARE - Bureau of Child Support Enforcement Health and Welfare Bldg. - Room 432 P.O. Box 2675 Harrisburg, PA 17105-2675															
3.		Lehigh County Authority 1053 Spruce Road Wescosville, PA 18106															
4.																	
5.																	
6.																	
7.																	
8.																	
Total Number of Pieces Listed by Sender		Total Number of Pieces Received at Post Office		Postmaster, Per (Name of receiving employee)		See Privacy Act Statement on Reverse											



Complete by Typewriter, Ink, or Ball Point Pen

PS Form 3877, February 2002 (Page 1 of 2)

USA-175710—Lehigh County Sale Date: 02/13/2019

CAROL A. STOUT & DAVID A. STOUT

Jill H.

USPS Manifest Mailing System

Page 1

USA-JV

Mailer's Name & Address KML Law Group 701 Market Street Suite 5000 Philadelphia, PA 19106	Permit Number 123	MAC Ver. Number ConnectShip Prologistics 6.5
	Sequence Number 8147-1	Class of Mail Mixed

Article #/ Piece ID	Addressee Name Delivery Address	ES Type	Postage	ES Fee	Insurance Amount	Due/ Sender	Total Charge
9171999991703969202613	STOUT, CAROL A.		0.705				5.56
9171999991703969202613	6300 Heidelberg Heights Road 150/1404 Heidelberg Heights Road Germansville, PA 18053	ERR C		1.40 3.45			
9171999991703969202620	STOUT, DAVID A.		0.705				5.56
9171999991703969202620	6300 Heidelberg Heights Road 150/1404 Heidelberg Heights Road Germansville, PA 18053	ERR C		1.40 3.45			
9171999991703969202637	STOUT, DAVID A.		0.705				5.56
9171999991703969202637	1014 4th Street Apt. 1 Catasauqua, PA 18053	ERR C		1.40 3.45			
Page Totals	3		2.11	14.55			16.67
Cumulative Totals	3		2.11	14.55			16.67

USPS CERTIFICATION

Total Number Of Pieces Received _____

Signature of Receiving Employee _____

Round Stamp _____

PS Form 3877 (Facsimile)

Extra Service Codes:

 C Certified
 ERR Return Receipt


UNITED STATES DISTRICT COURT
FOR THE
EASTERN DISTRICT OF PENNSYLVANIA

UNITED STATES OF AMERICA

Plaintiff

vs.

CAROL A. STOUT
DAVID A. STOUT

Defendant(s)

CIVIL NO. 17-05549

AFFIDAVIT PURSUANT TO RULE 3129

THE UNITED STATES OF AMERICA, Plaintiff in the above action, by counsel, KML Law Group, P.C. sets forth as of the date the praecipe for the writ of execution was filed the following information concerning the real property located at:

5300 Heidelberg Heights Road f/k/a 1404 Heidelberg Heights Road
Germansville, PA 18053

1. Name and address of Owner(s) or Reputed Owner(s):

CAROL A. STOUT
5300 Heidelberg Heights Road f/k/a 1404 Heidelberg Heights Road
Germansville, PA 18053

DAVID A. STOUT
5300 Heidelberg Heights Road f/k/a 1404 Heidelberg Heights Road
Germansville, PA 18053

2. Name and address of Defendant(s) in the judgment:

CAROL A. STOUT
5300 Heidelberg Heights Road f/k/a 1404 Heidelberg Heights Road
Germansville, PA 18053

DAVID A. STOUT
5300 Heidelberg Heights Road f/k/a 1404 Heidelberg Heights Road
Germansville, PA 18053

3. Name and last known address of every judgment creditor whose judgment is a record lien on the property to be sold:

DOMESTIC RELATIONS OF LEHIGH COUNTY
14 N 6th Street
Allentown, PA 18101

PA DEPARTMENT OF PUBLIC WELFARE - Bureau of Child Support Enforcement
Health and Welfare Bldg. - Room 432
P.O. Box 2675
Harrisburg, PA 17105-2675

Lehigh County Authority
1053 Spruce Road
Wescosville, PA 18106

4. Name and address of the last recorded holder of every mortgage of record:

5. Name and address of every other person who has any record interest in or record lien on the property and whose interest may be affected by the sale:

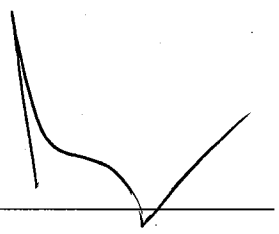
6. Name and address of every other person of whom the plaintiff has knowledge who has any record interest in the property which may be affected by the sale.

7. Name and address of every other person of whom the plaintiff has knowledge who has any interest in the property which may be affected by the sale.

TENANTS / OCCUPANTS
5300 Heidelberg Heights Road
Germansville, PA 18053

I verify that the statements made in this affidavit are true and correct to the best of my personal knowledge or information and belief. I understand that false statements herein are made subject to the penalties of 18 Pa. C.S. Section 4904 relating to unsworn falsification to authorities.

DATED: November 30, 2018



KML Law Group, P.C.
BY: Rebecca A. Solarz, Esq.
Attorney for Plaintiff